

GOVERNMENT OF ANDHRA PRADESH
ABSTRACT

Department for Women, Children, Disabled and Senior Citizens – Supplementary Nutrition Programme (SNP) under ICDS Scheme - Implementation of “Gorumuddalu” - “Special care and Supervised feeding” for children upto 5 years categorized under Severely Underweight(SUW)/Severe Acute Malnutrition (SAM)/Moderate Acute Malnutrition (MAM) - Orders – Issued.

DEPARTMENT FOR WOMEN, CHILDREN, DISABLED & SENIOR CITIZENS
(PROG.1)

G.O.Ms.No.26,

Dated.16th September, 2014.
Read the followings:-

1. G.O.Ms.No.14, Deptt for WCD&Scs, dt:28.02.2014.
2. G.O.Ms.No.15, Deptt for WCD&Scs, dt:28.02.2014.
3. From Commissioner, Women Dev. & Child Welfare, A.P.,Hyderabad, Letter No.1381/J3/14, dated:17.07.2014.

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ORDER:

In the ref.1st read above, the Government accorded permission to the Commissioner, WD&CW, Hyderabad to revise the food model for additional supplementation for Supervised feeding of children categorized under Severely Underweight (SUW) and also Severe Acute Malnutrition (SAM) / Moderate Acute Malnutrition (MAM) for both the age groups of 7 months–3 years and 3-6 years in the Anganwadi Centres (AWCs) in order to tackle malnutrition in the State.

2. In the reference 2nd read above, the Government issued guidelines for “Special care and Supervised feeding” of Children upto 5 years categorized under Severely Underweight (SUW) / Severe Acute Malnutrition (SAM) / Moderate Acute Malnutrition (MAM) under Supplementary Nutrition Programme (SNP) of the Integrated Child Development Service (ICDS) Scheme.

3. In the letter 3rd read above, the Commissioner, Women Development & Child Welfare Department, Hyderabad has informed that:

- i) Nutrition is a major determinant of health and well being of children.
- ii) Though, the implementation of ICDS has resulted in improvement of the nutritional status of children in the State, the desired goals have yet to be achieved and malnutrition among children in A.P still continues to be a challenge.
- iii) The first 1000 days are crucial for every child, as the nutritional status of the children during these early days has impact over their future life in terms of physical and mental development.
- iv) Low Birth Weight is a major contributing factor to child malnutrition and hence maternal nutrition is a most decisive factor in preventing Low Birth Weight babies. The prevalence of Low Birth Weight children as per NFHS-3 (2005-06) in Andhra Pradesh is 19.4% which is the highest among the other southern States viz. Karnataka (18.7), Tamilnadu (17.2) and Kerala (16.1).

- v) About one-third of children under three years of age in AP are identified as malnourished as per NFHS-3 (2005-06). In particular, 29.8% children are Underweight, 38.4% children are Stunted and 14.9% children are classified as Wasted. The percentage of Underweight children under 3 years of age is much lower at 25.9% for Tamilnadu and at 21.2% for Kerala.
 - vi) There has been reduction in percentage of Underweight Children of the age group of 0 to 3 years in AP from 34.2 % in 1998-99 (NFHS-2) to 29.8% in 2005-06 (NFHS-3). However the rate of decline is very slow and the present initiatives will not enable to achieve a goal set at 20% by the end of the 12th Plan (2016-17).
 - vii) In Andhra Pradesh, the high prevalence of anemia among children, adolescent and women is a major public health concern. As per NFHS-3, 79.6% of the children below 3 years in the State are anemic which is in fact slightly higher than the National average of 78.9%.
 - viii) Infant feeding practices too present a dismal picture in AP. According to the DLHS-3 (2007-08) only 47.8% of the total children below 3 years were breastfed within 1 hour of birth, 43.9% of the total children 0-5 months were exclusively breastfed and 55% of the children 6-9 months received complementary feeding (solid or semi-solid food and breast milk).
 - ix) The Government of Andhra Pradesh is committed to eliminating malnutrition among children, adolescents and women and is keen to introduce critical interventions to address the various dimensions of malnutrition. In order to reduce incidence of Low Birth Weight and to improve the nutritional status of Pregnant and Lactating Women the State Govt. is already supporting the “one full meal” programme of Pregnant and Lactating Women in 23491 Anganwadi Centers(AWCs) in 101 ICDS Projects out of 55024 AWCs in 254 ICDS Projects.
 - x) However there are more than 1½ lakh malnourished children below 5 years and there is a need to follow a targeted approach for such children by providing them required additional nutrition with special care.
 - xi) To focus on malnourished children below 5 years “Model Menus” have already been developed. As part of the “Model Menus” children have to be fed with caloric dense food at regular frequency. As children cannot be at the AWC for the whole day, only certain feeds as part of the “Model Menus” can be supervised at the AWC and others can be supervised at home. Medical attention has to be provided to these children and if necessary these children have to be referred to the Nutrition Rehabilitation Centres (NRCs) located at district hospitals.
 - xii) There is also need to focus on counseling of mothers so that they comply strictly with the standardized Infant Young Child Feeding (IYCF) practices. These include early initiation of breast feeding, exclusive breast feeding for 6 months, initiation of complementary feeding on completion of 6th month while continuing breast milk till 2 years, full immunization and adequate health care during illnesses.
4. In view of the above the Commissioner, WD&CW, Hyd has made certain recommendations for targeting the malnourished children and requested to issue orders to ensure strengthening of efforts towards special care and supervised feeding of malnourished children.

5. After careful examination of the proposal, Govt. hereby accords approval of the following:

- a) All malnourished children will be identified by “Weight for age” criteria for identifying Severe Underweight (SUW) and by “Weight for height” criteria for categorizing children under Moderate Acute Malnutrition (MAM) and Severely Acute Malnutrition (SAM).
- b) All malnourished children so identified will be provided with “Special care and Supervised feeding” and this programme will be known as “Gorumuddalu”.
- c) The various components of “Gorumuddalu” programme will include
 - Adequate additional supplementation for the malnourished children which will include egg, milk, meal, extra oil, calorific dense mix etc.
 - Prescribing of model menus and ensuring supervised feeding of malnourished children both at AWCs and at home as appropriate.
 - Regular medical care of the malnourished children for identifying underlying cause of malnutrition and appropriate follow-up.
 - Sustained counseling of mothers and involvement of community. For this counseling skills of the Anganwadi worker will be improved.
 - Incentivization of the AWWs, Sarpanches & others based on performance
- d) Introduction of “Gorumuddalu” programme is expected to have the following impact
 - Ensure regular growth monitoring and identification of malnourished children below 5 years
 - Enhance the quality and frequency of feeds under supervision at the AWC.
 - Ensure care in terms of medical attention.
 - Increase awareness among the mothers and community on Infant Young Child Feeding (IYCF) practices.
- e) The funds for this programme will be met from the ICDS budget to the extent possible and for which orders were also issued to initiate supervised feeding. However additional funding may be required. Hence funds for all components of “Gorumuddalu” may be met from ICDS budget.
 - Funds from World Bank assisted projects meant for health and nutrition.
 - Funds under SC and ST sub plan.
 - Funds under National Health Mission (if approved by GOI) and.

- If necessary, State Govt. will provide for additional budgetary support.

f) Monitoring & transparency systems for “Gorumuddalu” will be established and evaluation studies carried out to understand the impact of such an initiative.

6. The Commissioner, Women Development & Child Welfare Department, Hyderabad is requested to issue detailed guidelines and take further necessary action in the matter.

7. A copy of this order is available on the internet and can be accessed at the address <http://goir.ap.gov.in>.

(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)

NILAM SAWHNEY,
PRINCIPAL SECRETARY TO GOVERNMENT.

To

The Commissioner, Women Development & Child Welfare Department, A.P. Hyderabad.
All District Collectors in the State.

All Regional Joint Directors of WD & CW in the State.

All Project Directors of Dist. Women & Child Dev. Agency in the State

All CDPOs of Women Development & Child Welfare in the State.

The Managing Director, A.P Foods, Hyderabad.

through

Commr.,

WD&CW, Hyd

Copy to:

PS to Prl.Secy to Government, WCD&SCs Department.

PS to Prl.Secy to Government, Rural Development.

PS to Secy to Government, Health Medical and Family Welfare.

The Commissioner, Health & Family Welfare.

The CEO, SERP, A.P, Hyderabad.

SC/SF.

// FORWARDED :: BY ORDER //

SECTION OFFICER